PROBATE COURT NO. TWO JUDGE MICHAEL NEWMAN

Attorney Name:	
Firm Name:	
Bar #:	
Address:	
Phone Number:	
Fax Number:	
Cell Phone Number:	
E-mail:	
Foreign languages spoken (including sign	n language):
In which roles would y	ou like to serve?
Heirs	hip
	rney Ad Litem dian Ad Litem
as a E as a N as an as an	t (you must have additional licenses/certifications or experience): Doctor for an Independent Medical Exam Mediator Appraiser of Personal Property Appraiser of Real Property Private Professional Guardian

Please attach your current four hour certificate, along with your resume. It is the responsibility of the attorney to notify the court of any changes to the above.